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**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| CLAIMS AS FILED - PART I   |   |                      |  |                                    |                |                                    |                                      |       | SMALL  | ENTITY                 |          | OTHER                         | THAN                   |
|--|---|----------------------|--|------------------------------------|----------------|------------------------------------|--------------------------------------|-------|--|------------------------|----------|-------------------------------|------------------------|
| FOR  |   |                      | —————————————————————————————————————— | Column 1)                          |                | (Column 2)                         |                                      |       | TYPE   |                        | OR       | SMALL                         |                        |
|  |   |                      | NUMBER FILED                           |                                    |                | NUMBER EXTRA                       |                                      |       | RATE   | FEE                    | ]        | RATE                          | FEE                    |
| BASIC FEE  |   |                      |  |                                    | <b>.</b>       |                                    |                                      |       |  | 345.00                 | OR       |                               | 690.00                 |
| TOTAL CLAIMS   |   |                      | /) minus 20=                           |                                    |                | • /                                |                                      |       | X\$ 9=   | ·                      | OR       | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |   |                      | <u> </u>                               | minus                              | 3 =            | •                                  | 2                                    |       | X39=   |                        | OR       | X78=                          | 156                    |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |                      |  |                                    |                |                                    |                                      | +130= |  | OR                     | +260=    |                               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |                      |  |                                    |                |                                    | L                                    | TOTAL | <del>                                     </del> | OR                     | TOTAL    | 840                           |                        |
| CLAIMS AS AMENDED - PART II  |   |                      |  |                                    |                |                                    |                                      |       |  |                        | <b>_</b> | OTHER                         |                        |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST                          |   |                      |  |                                    |                |                                    |                                      |       | SMALL  | ENTITY                 | OR       | SMALL                         |                        |
| AMENDMENT A  |   | REM.<br>AF           | AINING<br>TER<br>IDMENT                |                                    | PF             | NUMBER<br>REVIOUSLY<br>PAID FOR    | PRESENT<br>EXTRA                     |       | RATE   | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *                    | 17                                     | Minus                              | **             | _15_                               | = /                                  |       | X\$ 9=   |                        | OR       | X\$18=                        |                        |
| AME  | Independent   | *                    | 7                                      | Minus                              | ***            | 5                                  | 1 - Q                                |       | X39=   |                        | OR       | ×AZ •                         | 16800                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |                      |  |                                    |                |                                    |                                      |       | +130=  |                        | OR       | +260=                         |                        |
|  |   |                      |  |                                    |                |                                    |                                      | L     | TOTAL  | <u> </u>               | ام       | TOTAL                         | \$16200                |
| (Column 1) (Column 2) (Column 3)   |   |                      |  |                                    |                |                                    |                                      |       | DDIT. FEE  |                        | <b>]</b> | ADDIT. FEE                    | 700.                   |
| 8  |   | CL                   | AIMS                                   | 1 18 3 5 5 E                       | ١              | HIGHEST                            | (00/0/////0/                         |       |  | ADDI-                  |          |                               | 4001                   |
|  |   | AF                   | AINING<br>TER<br>DMENT                 |                                    | PR             | NUMBER<br>REVIOUSLY<br>PAID FOR    | PRESENT<br>EXTRA                     | İ     | RATE   | TIONAL                 |          | RATE                          | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total   | *                    | 5                                      | Minus                              | _              | 20                                 | =                                    |       | X\$ 9=   | 1 55                   | OR       | X\$18=                        | <u> </u>               |
|  | Independent   | *                    | 4                                      | Minus                              | ***            | 7                                  | =                                    | ┢     | X39=   | ·                      |          |                               |                        |
| ٩  | FIRST PRESE   | NTATIO               | N <sup>'</sup> OF M                    | JLTIPLE DEI                        | PEND           | ENT CLAIM                          |                                      | ╟     | 703-   |                        | OR       | X78=                          |                        |
|  |   |                      |  |                                    |                |                                    |                                      |       | +130=<br>TOTAL                                   |                        | OR       | +260=                         |                        |
|  |   |                      |  |                                    |                |                                    |                                      |       |  |                        | OR       | TOTAL<br>ADDIT. FEE           |                        |
| _  |   |                      | imn 1)                                 | 1 1 1 1 1 1 1 1 1 1                |                | olumn 2)<br>HIGHEST                | (Column 3)                           | _     |  |                        | _        |                               | [                      |
| AMENDMENT C  |   | REMA<br>AF           | AINING<br>TER<br>DMENT                 |                                    | PR             | NUMBER<br>EVIOUSLY<br>PAID FOR     | PRESENT<br>EXTRA                     |       | RATE   | ADDI-<br>TIONAL<br>FEE |          | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total   | · 5                  |  | Minus                              | **C            | 20                                 | =                                    |       | X\$ 9= ·   |                        | OR       | X\$18=                        |                        |
|  | Ind pendent<br>FIRST PRESE  | * #                  | N OF M                                 | Minus                              | ***            | <del>7</del>                       |                                      | T     | X39=   |                        | OR       | X78=                          |                        |
|  | I INOT PRESE  | VIAIIO               | IN OF MU                               | ·                                  | FND            | ENT CLAIM                          |                                      | 十     | +130=  |                        |          |                               |                        |
| ٠ ۱  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                      |  |                                    |                |                                    |                                      |       |  |                        | OR       | +260=                         |                        |
| **   | f the "Highest Nun<br>If the "Highest Nur<br>The "Highest Num                         | nber Pre<br>nber Pre | viously Pa<br>viously Pa               | aid For" IN THI<br>aid For" IN THI | S SPA<br>S SPA | CE is less that<br>CE is less that | n 20, enter "20 "<br>n 3. enter "3." |       | TOTAL<br>DIT. FEE                                | propriate box          |          | TOTAL<br>ADDIT. FEE<br>Jmn 1. |                        |